

Borough of



Colchester.

EDUCATION COMMITTEE.

Annual Report

OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR 1942.



Colchester:

WILES & SON LTD., TRINITY STREET.

1943.

Medical Inspection Sub-Committee, 1942-1943.

Chairman :

COUNCILLOR MRS. R. BENSUSAN-BUTT, M.D.

Deputy-Chairman :

DEPUTY MAYOR (COUNCILLOR H. H. FISHER, J.P.).

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REV. CANON T. W. CLARKE.	

STAFF.

School Medical Officer and Medical Officer of Health :

WALTER F. CORFIELD, M.D., B.S., D.P.H.

Assistant School Medical Officer and Assistant Medical Officer of Health :

R. W. CUSHING, M.A., M.B., B.Ch. (on Active Service).

MRS. W. WALKER, M.B., Ch.B., D.P.H. (from 18/9/39).

Orthopædic Surgeon :

T. A. OGILVIE, F.R.C.S.

X-Ray Specialist :

J. ORD PENDER SMITH, M.B., Ch.B.

School Dental Surgeon :

J. F. GODFREY, L.D.S., R.C.S.

Physical Training Organiser :

H. LAMONBY.

Dipl., Cent. Inst., London ; Mem. Ling Assoc.

Massage and Remedial Exercises :

COUNTY COUNCIL MASSEUSE.

School Nurse :

MRS. G. A. BLIGHT.*

Dental Nurse :

MISS V. M. WILBY.

Health Nurses :

MISS E. R. SMITH.*†‡

MISS M. G. PENNICK.*†‡

MISS M. E. RICKARD.*†‡

MISS A. BICKERDIKE.*†‡

MISS M. WILLIAMSON.*†‡

* S.R.N. † Cert. Midwife, ‡ Cert. H.V.

Secretary to the Education Committee :

J. CUCKNEY, M.A.

HEALTH OFFICES,

TRINITY STREET.

TO THE CHAIRMAN AND MEMBERS OF THE
EDUCATION COMMITTEE OF THE BOROUGH
OF COLCHESTER.

MR. CHAIRMAN, LADIES and GENTLEMEN,

I have the honour of presenting to you the Thirty-third Annual Report upon the work of the School Medical Department.

There are two or three points to be noted in the following report. It is to be regretted that conditions of uncleanness have somewhat increased. This has, I believe, been a universal experience of war-time. The percentage figure for cases of Pediculosis Capitis has only slightly increased and cannot be considered a high figure, the increase above the pre-war figure being only 1.5 per cent. Scabies has increased seriously all over the country but the Colchester figure remains very much the same as in 1941, so it is gratifying to find this condition is being held in check, though the number of cases are not yet being reduced. Cases of Impetigo are too prevalent but no doubt Scabies is partly responsible for this increase.

The Nutrition figures have improved, clearly showing that the children are in no way suffering from food deficiency. It should be noted that there has been a large increase in the number of children receiving free dinners and dinners paid for by the parents, and also some increase in the number receiving free milk.

The alterations in the Dental Clinic have been completed and the Recovery Room is in frequent use and is much appreciated.

There are some small alterations in the Statistical Tables.

I am, Ladies and Gentlemen,

Your obedient servant,

W. F. CORFIELD,

*Medical Officer of Health and
School Medical Officer.*

Report

OF THE

School Medical Officer

FOR THE YEAR 1942.

STAFF AND CO-ORDINATION WITH OTHER HEALTH SERVICES. SCHOOL HYGIENE.

Only one change occurred in the staff of the Department during the year. Nurse Williamson was not altogether happy in her work. She was given the opportunity of seeking another appointment and Nurse Fletcher was appointed in her place. Nurse Fletcher took up the appointment on 1st January, 1943.

The work of the Department has continued as previously. No alterations have been carried out in any of the School Buildings.

SCHOOL ATTENDANCE.

Daily Average Number of Chil-	1941.	1942.	Increase or Decrease
dren on the School Register	4,795	5,102	+307
Daily Average Attendance			
Percentage	84.3	86.9	+2.6

UNCLEANLINESS.*Pediculosis Capitis in the Elementary Schools.*

School.		Increase or Decrease	Percentage of cases to Examina- tions, 1942.
Wilson Marriage, Senior Mixed	....	+ 1	3.4
" Infants	....	+ 31	4.6
Canterbury Road, Junior Mixed	....	+ 17	3.0
" Infants	....	+ 10	3.0
East Ward, Senior Mixed	....	— 12	3.1
Harwich Road, Junior Mixed	....	— 13	7.6
" Infants	....	— 12	6.5
Hamilton Road, Central	....	— 7	2.0
" Junior Mixed	....	— 3	0.0
Myland, Mixed and Infants	....	+ 11	3.6
North Street, Mixed	....	— 17	1.9
" Infants	....	+ 47	9.3
Old Heath, Junior, Mixed and Infants	....	— 3	3.6
St. John's Green, Mixed	....	+ 30	8.2
" Infants	....	+ 35	13.0
Stockwell Street, Infants	....	— 3	3.0
Special (Feeble-Minded)	....	— 5	0.0
Greenstead, Junior, Mixed and Infants	....	—	1.6
Kendall Road, Jun., M. and I.	....	+ 9	2.8
Lexden, Mixed and Infants	....	— 18	3.6
Parson's Heath, Jun., M. and I.	....	+ 1	0.9
Priory Street, Mixed	....	+ 6	7.9
" Infants	....	+ 10	10.6
St. James', Junior, Girls and Infants	....	— 3	1.9
St. John's, Junior, Mixed and Infants	....	— 2	0.8
Shrub End, Junior, Mixed and Infants	....	— 3	0.3
St. Helena, Senior Boys	....	— 2	0.0
" Senior Girls	....	+ 23	6.6
TOTALS		+128	4.4

Total Percentages, 1938-42.

1938	1939	1940	1941	1942
2.9	2.9	3.2	4.2	4.4

It is clear from the above Table that the increase in "dirty heads" is due to the mothers in the town not having as much time as they had before the war to attend to the little children's heads.

Hamilton Road School is a shining example to the other large Schools in the centre of the Borough. Several other Schools such as St. James', St. John's, Parson's Heath, Canterbury Road, East Ward, Shrub End and Greenstead Road have excellent returns. Particularly praiseworthy is the *nil* return from Stockwell St. (Feeble-Minded) Special School.

The St. Helena Senior Girls return is not so bad as it appears at first sight. All the other schools are "Mixed" Schools, i.e., boys and girls, and as boys do not suffer from Pediculosis Capitis to nearly the same extent as girls, the returns of all the other schools are reduced by the number of boys in the schools, whereas the St. Helena returns are for Boys and Girls separately. If taken together the return would be at least halved. If the other school returns gave boys and girls separately many of the returns for the girls would be double the figures given.

It is difficult to understand why girls cannot be taught to take pride in the cleanliness of their heads.

INFECTIOUS DISEASES.

Infectious Disease amongst Elementary School Children.

Diphtheria.	Scarlet Fever.	Whooping Cough.	Measles.	Chicken Pox.	Mumps.	German Measles.	Cerebro-Spinal Fever.	Typhoid Fever
1941—4	48	225	529	173	7	14	—	1
1942—8	42	65	4	140	210	1	—	—

Totals 1941 = 1001.

1942 = 470.

Mumps was the only infectious disease that gave a high return for the year. Measles was very low. None of these diseases occurred in epidemic form.

CLOTHING AND FOOTGEAR.

Routine Medical Inspection showed a return of 99.5% of children with good boots and 99.5% with sufficient and satisfactory clothing.

In only 0.5% was the clothing unsatisfactory and in 0.5% the boots poor.

This is the best return ever recorded in Colchester for Clothing and Footgear. It may partly be due to the good wages earned by the parents but it speaks well for the care bestowed upon the children by their parents and teachers. Also it indicates very clearly no war shortage of children's clothing.

MINOR AILMENTS CLINIC.

	1940	1941	1942
Number of "following-up" visits	273	292	241
Times the Clinic was open	89	83	84
Attendances made by children with Defects	6,069	7,648	7,249
New Cases	923	1,314	1,534
Av. number of children at each Clinic	68	92	86

NURSES' CLINIC.

	1941	1942
Number of Cases	1,234	1,150
Attendances	2,115	1,183

A small general fall in the figures for 1942 is shown in the above Tables. Such large figures are certain to vary from year to year for a number of causes but it should be noted that the number of "New Cases" at the Minor Ailments Clinic continues to increase. The assistance given voluntarily by a number of ladies in this Clinic is very greatly appreciated. The doctor and nurses could not get through the work without this help.

SKIN DISEASES.

Number of Cases of Ringworm, Scabies and Impetigo referred for Treatment.

DISEASE.	1940.	1941.	1942.
Ringworm : Scalp ...	1	—	—
Body ...	3	8	6
Scabies ...	27	113	116
Impetigo ...	261	243	306

These unpleasant diseases increase in wartime. It is difficult to know why. Probably a certain number of careless and uncleanly persons keep up the supply of the Scabies infection which is probably the root-cause of the increase in Impetigo.

EYE DISEASES AND DEFECTIVE VISION.

Cases referred for Treatment.

DEFECTS.	1940	1941	1942
Blepharitis ...	15	26	38
Conjunctivitis ...	18	34	41
Defective Vision ...	89	204	295
Squint ...	7	7	10

EYE CLINIC FOR VISUAL DEFECTS.

	1941	1942
Times the Clinic was open....	46	65
Attendances made by children	812	1,219
Average number of children at each Clinic....	17.6	18.7
Number of new cases	204	295
Cases for whom Spectacles prescribed	129	224

The number of children attending this clinic still increases. It can only be accounted for by the fact that Dr. Walker has found it possible to devote more time to the treatment of visual defects than was formerly the case. It will be noted that the number of clinics held was considerably increased.

There are 2 blind children: one attends the Blind School which is now at Dorton, near Aylesbury, and used to be in Swiss Cottage. The other is at Court Grange Blind School, Abbots Kerswell, S. Devon.

As in previous years, difficult cases have been referred to the County Consultant. In 1942 five cases were sent to him for a further opinion.

EAR DISEASE.

Cases referred for Treatment.

DEFECT.	1940	1941	1942
Otitis Media ...	1	5	4

Though the war has been blamed for many ills, it may take the credit for the sensational and continuing drop in the number of children suffering from middle ear disease.

In 1938 there were 17 cases and in the preceding years this figure was higher. Yet from 1939—1942 only 10 cases altogether were discovered at Medical Inspections. This result

definitely shows that the children are not suffering from mal-nutrition or debility, as it is the undernourished debilitated child that readily succumbs to aural and nasal discharges due to unhealthy pharyngeal conditions.

NOSE AND THROAT DISEASE.

Cases referred for Treatment.

DEFECT.	1940.	1941.	1942.
Enlarged Tonsils	2	2	6
Adenoids	10	6	22
Enlarged Tonsils and Adenoids	39	26	88
Other Conditions	45	35	65

The increase of cases looks a little as though greater care had been taken over nose and throat examinations at School Medical Inspections. It is difficult to account for the increase in any other way.

DEFORMITIES AND CRIPPLING CONDITIONS.

Orthopædic Clinic.

	1941	1942
Times this Clinic was held....	3	4
Attendances	73	104
Children sent to Hospitals	—	—
Children ordered special boots or appliances....	45	59
Children ordered other forms of treatment	21	25
Children recommended for observation	3	5
Children taken off Register	4	15
Number of Individual Patients	54	81

ORTHOPÆDIC REMEDIAL CLINIC.

	1942
Attendances by Borough School Children	894
Attendances by Borough Pre-school Children....	114

The increase in the number of children attending this Clinic is due to the fact that four clinics were held in 1942 whereas only three were held in 1941.

TUBERCULOSIS.

There still are no cases of Pulmonary Tuberculosis among the School Children. All the cases notified in children were of the non-pulmonary type as follows—Tubercular Glands, boys 8 ; girls 6 ; Tuberculosis of Bones or Joints, boys 1 ; girls 1 ; Eleven of these children were fit to attend school, three were in Sanatoria and two were at home at the end of the year. A total of 16 children; in 1941 there were 20 such cases.

NUTRITION.

Classification of Nutrition of children examined at Routine Medical Inspections.

				1941	1942
Number Examined	....	....	....	1,253	1,726
				Per cent.	Per cent.
A.	Nutrition Excellent	....	....	0.4	0.5
B.	„ Normal....	....	....	81.8	87.2
C.	„ Slightly Sub-Normal	....	....	17.5	12.5
D.	„ Bad	....	....	0.0	0.1

It is reasonable to consider that the above figures show a slight but definite improvement upon the figures of the previous year. A fine advertisement for the food supply during the third year of the war.

DELICATE CHILDREN.

No children under this category have been able to be sent to any Special Home during the year. The special register of such children now contains 52 names. This is 15 less than in the previous year.

PROVISION OF MEALS.

				1941	1942
Children receiving free dinners	....	....	....	168	415
„ „ „ milk	....	....	....	428	517
„ „ „ cod-liver oil	....	....	....	49	118
~~„ „ „ milk under the milk-~~					
~~in school scheme~~				~~3,561~~	~~3,222~~
„ „ „ Parrish's Food, Emul-					
sion, etc.	....	....	....	16	32

Undoubtedly the children are greatly benefitted by both the supply of dinners and milk. The numbers receiving these have increased considerably. It should be noted that both Cod Liver Oil and the Iron Tonic are being used more freely; this is partly a war-time precaution.

CO-OPERATION OF PARENTS, TEACHERS AND VOLUNTARY BODIES.

Number of Parents present at 1,726 Routine Medical Inspections.

ENTRANTS.	INTERMEDIATES.	LEAVERS.	TOTAL.
735 89 per cent.	610 81 per cent.	73 47 per cent.	1418 82 per cent.

There is a slight further fall in the attendance of parents at Routine Medical Inspections, but this is to be expected when so many of the mothers are engaged upon war work.

The Teachers and Voluntary Societies continue to give most valuable help to the School Medical Department. Particular mention must be made of those ladies who regularly assist in the School Clinics.

CHILDREN EXEMPT FROM FURTHER SCHOOL ATTENDANCE.

One child was exempt from further school attendance during 1942 owing to severe heart disease.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

	Approved	Refused
Boys examined for Employment Certificates	123	1
Girls examined for Employment Certificates	1	—

W. F. CORFIELD, M.D., D.P.H.,

*Medical Officer of Health and
School Medical Officer.*

REPORTS OF THE

Dental Surgeon

Mr. J. F. GODFREY, L.D.S., R.C.S. (Eng.)

AND OF THE

Organiser of Physical Training

Mr. HAROLD LAMONBY.

THE REPORT OF THE SCHOOL DENTAL SURGEON, 1942.

GENERAL OUTLINE.

The School Dental Service during this third year of war has continued to function smoothly and efficiently. No outstanding changes have taken place and the work has been carried out as in pre-war years.

All children attending the Elementary Schools, excepting those who are excluded from inspection under the Committee's ruling of 28/3/1938, if present, are examined and the parents of those requiring treatment are advised. If many are absent the inspection is completed at a later date. If a few only are absent they are given the opportunity of attending at the Clinic for examination and the parents advised if treatment is necessary.

As the Nursery Classes come into being the children in these departments are included, automatically, in the scheme. Children, excepting exclusions, are thus kept under regular observation from the year of entry to the year of leaving. Children who are under treatment immediately prior to leaving school and whose treatment is not completed before they leave are given the opportunity of completion, especially of filling treatment, after leaving. This is regarded as an obligation to be carried out in the best interests of the child and the State. This at least will start them aright at the commencement of what might be termed the "adolescent gap," namely, the period between the school leaving age and the age at which they become eligible for dental treatment under the National Health Insurance scheme. As has been pointed out in reports of previous years it is lamentable that this "gap" should exist at an age when so much avoidable and often permanent damage may, and all too frequently does, occur in the mouths of these

young people. The aim always in mind is to have the child, at school-leaving age, with a sound set of permanent teeth, naturally so or artificially made so.

CHILDREN EXCLUDED FROM DENTAL INSPECTIONS.

Following upon instructions given by the Committee the parents of children who, previously, would have been excluded from further routine dental inspection under the Committee's ruling of 28/3/1938 now receive a warning before such exclusion becomes operative. This takes the form of a small slip which is attached to the notice of advice. It is printed in red and reads as follows—

“NOTICE.—Certain parents ignore all invitations for treatment and advice. If after a dental inspection in any School, invitations for treatment are ignored a second time, you will forfeit all right to any further inspections being carried out for your child, as they serve no useful purpose unless treatment results.

This is the second inspection.”

This has not been in operation sufficiently long to enable a useful analysis to be made of the reaction on the part of the parents concerned. This step, though good in itself as a stimulant and as a reminder that there may be something to be lost which, possibly, might be worth having, leaves quite unsolved the ever present, vexatious problem of the persistent and chronic casual who attends in order that the Dental Surgeon may complete the process of destruction of an organ which normally should be retained throughout adult life.

ATTENDANCES.

Speaking generally the attendance for appointments is very good indeed. When one realises how difficult it is, under present war conditions, for parents living in outlying suburbs to get in to the clinic, when one realises that some are engaged in part time war work and some in full time war work and all have their home to look after and shopping to do—then the attendance is indeed amazingly good. Every consideration is given to them to make the time of appointment convenient and all have their own appointment time, excepting appointments for gas clinics. Reply cancellation cards M.I. 89 are sent out with each appointment made in order that an appointment may be made for another child in the event of cancellation. These cards are retained by the parent until completion of treatment. Of these M.I. 89 cards 123 were returned during the year, of this number 30 were received too late for fresh appointments to be made. Broken appointments, namely, those not kept by the patient and for which no reason, warning or

explanation is given, numbered 174 for the year. This is equivalent to .47 per session, a still further decrease over any preceding year. A decrease from 1.7 in 1930.

YEAR.	NUMBER OF SESSIONS OF TREATMENT.	BROKEN APPOINTMENTS.	NUMBER PER SESSION.
1934	380	534	1.4
1935	333	487	1.4
1936	368	455	1.24
1937	348	395	1.12
1938	382	324	.85
1939	381	247	.65
1941	371	230	.62
1942	367	174	.47

The above small table shows the steady decrease during the last few years. The year 1940 was too disturbed and broken to include. Emergency cancellations by 'phone or otherwise as the result of sudden illness or other unforeseen event numbered 129. The total of broken appointments, emergency cancellations and M.I. 89 returned too late altogether amount only to .82 per session.

The behaviour of a very large percentage of the children is amazingly good. Their nervous stability and stamina seem equally good. It is difficult to realise, from behaviour in the chair, that they have lived for three and a half years under war conditions.

ORTHODONTIA (Regulation of Teeth).

Not much can be done to meet the growing demand for this form of treatment under the present staffing conditions. During the year 13 cases were under treatment by appliances: 12 appliances were inserted: 178 attendances were made for adjustment of appliances: 5 cases were completed and 1 case was discontinued because the boy did not wear and persistently broke his appliance. Cases regulated by extraction were 9. Cases where one or more badly misplaced teeth are removed are not recorded as regulations.

ARTIFICIAL DENTURES.

Artificial dentures have been inserted in the mouths of four children where upper incisor teeth had been lost. In two cases, adjoining teeth had to be moved into correct position before a restoration was feasible. Two metal dentures were repaired and re-inserted.

ACCOMMODATION.

Since the last report the clinic accommodation has been increased by the addition of a recovery room and a lavatory. This is a very great improvement over the pre-existing accommodation and a great convenience. The separate entrance and

exit, especially during gas sessions, is a definite help and a marked asset. It enables patients as and when fit to go without any disturbance of the clinic operating room. The added storage space and eupboard room also meets a long standing need. The extractor fan which has been installed in the clinic does not appear to have much effect in reducing the temperature in the hot weather, when it is nothing unusual for the temperature at the chairside to reach 100 deg. F., but it does seem to have a cleansing effect and makes the air in the room feel less stagnant.

Mr. MacNamara, one of the County Dental Officers, has continued to give one session per week to the service of the Authority.

As this report, of necessity, has to be short, the statistical tables are given at the end of the Report.

J. F. GODFREY, L.D.S., R.C.S.(Eng.)

School Dental Surgeon.

REPORT OF THE ORGANISER OF PHYSICAL EDUCATION FOR THE YEAR 1942.

INTRODUCTION.

There are three fundamental features of the modern conception of Physical Education:—

1. The programme must be comprehensive. It must include Hygiene, Gymnastics, Organised Games, Swimming and Athletics. The importance of Hygiene has been stressed in the Board of Education publications on Health. Teachers are in the position to give guidance in inculcating healthy ways of living to the children under their control.
2. It must be recognised that the relation between the physical and mental sides of education is intimate. The Greeks in early times recognised the interdependence of mind and body. "Mens sana in corpore sano" was full of significance. During the last decade, we have happily been getting back to this view point. It is becoming more and more apparent that a sound, evenly balanced mentality demands a healthy and sound body. It is the balance between the two which is of great importance. Strong physique with an ill nourished mind is as wrong in the science of life as the massive intellect struggling against ill health.

3. The aim must be the fullest development of the individual. An all-round development of each child and not of a selected few is the object. It is necessary always to have this point in mind. It is easy to lose sight of this principle, particularly in games and athletics, and this danger must be guarded against.

In the following paragraphs, brief observations are given on various aspects of the work:—

GYMNASTICS.

The majority of teachers are able to get through their lesson in the thirty minutes usually allowed on the time-table.

DRESS AND SHOES.

In spite of clothing difficulties many children continue to wear suitable clothing for the lesson. The provision by the Education Committee of a number of shoes to each school has helped the shoe problem.

SENIOR SCHOOLS.

In the Girls' Departments, the work has not suffered at all, and reaches a very good standard, and where gymnastic apparatus is provided, the teachers make full use of their opportunities. We are fortunate, as three of our teachers have attended the Board of Education advanced course.

It is on the Boys' side where the gymnastic work has suffered, as all our specialist teachers are serving in the Forces. However, some of the non-specialist teachers have shouldered their responsibilities and are carrying on the work in a modified form under my direction.

During the summer, I was able to get some of our male staff to attend a course of Physical Training and Games organised by my County colleagues and myself. They found this course very valuable.

POSTURE.

Good results have undoubtedly been secured in this important point. The carriage has definitely improved. We must not, however, be content to rest on our oars: much remains to be done. Good posture is the outward and visible sign of physical and mental alertness.

ORGANISED GAMES.

The majority of schools now attend the playing fields—in some cases there is adequate shelter accommodation on or near the fields. Where this is not possible, the lesson is taken in the school playground. All playgrounds are marked out for minor games and the surfaces of most playgrounds are good.

SWIMMING.

Last summer more classes attended the Bathing Place for instruction; this was very gratifying; during the two previous years this branch of the work has been considerably curtailed owing to circumstances outside our control.

SCHOOLS ATHLETIC ASSOCIATION.

Although this organisation is not functioning fully, certain friendly matches have been played in cricket, netball and football. It was interesting to note that many schools revived their sports afternoon. This effort was appreciated by parents and formed part of the work undertaken by the schools in the Holidays at Home Scheme.

Once again, it is a pleasure to record my appreciation of the Committee's support, the Secretary's guidance and help, and the loyal co-operation of the teachers.

(Signed) HAROLD LAMONBY,

Organiser of Physical Training.

TABLE I.

MEDICAL INSPECTION RETURNS.*Year ended 31st December, 1942.***A—Routine Medical Inspections.**

Number of Inspections in the prescribed Groups—

Entrants ...	...	...	...	...	820
Second Age Group ...	...	..	...	...	753
Third Age Group ...	...	...	...	...	153
TOTAL ...					1726
Number of Other Routine Inspections ..				...	—
GRAND TOTAL ...					1726

B—Other Inspections.

Number of Special Inspections and Re-Inspections ... 2943

TABLE II.

Classification of the Nutrition of Children Inspected during the Year in the Routine Age Groups

Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
	No.	%	No.	%	No.	%	No.	%
1726	1	0·05	1506	87·2	217	12·5	2	0·1

TABLE III.

Group I.—Treatment of Minor Ailments (excluding Uncleanliness).

Total Number of Defects treated or under treatment during the year under the Authority's Scheme ... 1594.

Group II.—Treatment of Defective Vision and Squint.

		Under the Authority's Scheme.
Errors of Refraction (including Squint) ...	...	295
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ...	...	—
TOTAL ...	...	295

No. of Children for whom spectacles were

(a) Prescribed ...	...	...	224
(b) Obtained ...	...	...	200

Group III.—Treatment of Defects of Nose and Throat.

Received Operative Treatment ...	...	...	6
Received other forms of Treatment ...	...	...	73
Total number treated...	...	...	79

TABLE IV.

Dental Inspection and Treatment.

(1) Number of Children inspected by the Dentist—				
(a) Routine age-groups	...	...	...	2093
(b) Specials	...	...	...	48
(c) Total (Routine and Specials)	...	...	...	2141
(2) Number found to require treatment	...	...	1502	
(3) Number actually treated	...	...	1201	
(4) Attendances made by children for treatment	...	...	3093	
(5) Half-days devoted to:—				
Inspection	...	32	} Total 440	
Treatment	...	408		
(6) Fillings:—				
Permanent teeth	2347	} Total 3479		
Temporary teeth	1132			
(7) Extractions:—				
Permanent teeth	130	} Total 1784		
Temporary teeth	1654			
(8) Administrations of general anæsthetics for extractions				494
(9) Other Operations:—				
Permanent teeth	583	} Total 719		
Temporary teeth	136			

TABLE V.

Verminous Conditions.

(i.) Average number of visits per school made during the year by the School Nurses or other authorised persons	...	14
(ii.) Total number of examinations of children in the Schools by School Nurses or other authorised persons	...	18645
(iii.) Number of individual children found unclean	...	465
(iv.) Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	...	—
(v.) Number of cases in which legal proceedings were taken—		
(a) Under the Education Act, 1921	...	—
(b) Under School Attendance Byelaws	...	—

TABLE VI.

BLIND AND DEAF CHILDREN.

Number of totally or almost totally blind and deaf children who are not at the present time receiving education suitable for their special needs. The return should relate to all such children including evacuees resident in the Authority's area.

	1 At a Public Elementary School.	2 At an institution other than a Special School.	3 At no School or Institution.
Blind Children	—	—	—
Deaf Children	—	—	1

TABLE VII.
SCHOOL MEDICAL AND DENTAL STAFF.

Name of Officer.	Proportion of whole time devoted to School Medical Service. | Public Health.	
S.M.O.— Corfield, Walter Francis, M.D., B.S. (Lond.), D.P.H. (Camb.), M.O.H., Colchester.	1/18	17/18
A.S.M.O.— Walker, Winifred (Mrs.) (nee Wight), M.B., Ch.B., D.P.H., A.M.O.H., Colchester.	$\frac{3}{4}$	$\frac{1}{4}$
Senior Dentist— Godfrey, John Frederick, L.D.S., R.C.S., Eng.	Full-time	3 hours per week M.C.W. work.
Dentists— County Dentist	$\frac{1}{11}$ Borough $\frac{10}{11}$ County	—

SCHOOL NURSING STAFF

(excluding Specialist Nurses such as Orthopædic Nurses).

	Number of Officers.	Aggregate of time given to S.M.S. work in terms of whole time officers.
School Nurses ...	3	1½ full-time.
District Nurses ...	—	—
Nursing Assistants ...	—	—
Dental Attendants ...	1	Full-time.

W. F. CORFIELD, M.D., D.P.H.,
*Medical Officer of Health and
School Medical Officer.*

Trinity Street,
Colchester.